PATENT APPLICATION SEE DETERMINATION DECARRANT OF DOCKET Number												umber
PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004												93
CLAIMS AS FILED - PART I									ENTINY			
 	(Column 1) (Column 2)							TYPE	ENTITY	O		R THAN L ENTITY
TOTAL CLAIMS								RATE		``	`	
FOR			Manag	NAMBER FILED		NUMBER EXTRA				4	RATE	 /
ŀ.	TAL CHARGE	- TOMBE			INUMBER EXTRA		BASIC F		01	BASIC FE	E /	
┢	OTAL CHARGE	1	minus 20=		*		X\$ 25	. /	OF	X\$50=		
INDEPENDENT CLAIMS				minus 3 =	•			X108=	1	7	1	/
М	ULTIPLE DEPE	ENDENT CLAIM	PRESENT						4	_ OF	X200	<u> </u>
_	المال المالي				180=	I	OF	7360=				
* If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL												+
CLAIMS AS AMENDED . PART II												
Z	(Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR		R THAN ENTITY
⋖		REMAINING		HIGH		PRÉSENT] · [·	ADDI	_ ``		ADDI-
3		AFTER AMENDMENT	.	PREVIO	USLY	EXTRA	ŀl	RATE	TIONA		RATE	TIONAL
3	Total	. 5.7	Minus	PAID F	10	1			FEE	-		FEE
AMENDMENTA	Independent	1.4	Minus	1 7	<u> </u>			X\$ 25=		∐ OR	X\$50=	200
₹	FIRST PRES	ENTATION OF M		PENDENT	2	· 0		X100=	7	OR	X200=	
_	1		OLI IFUE DE	PENUENT	CLAIM		!	.466	 / 	7		122
							L	+180=	1/_	OR		060
1	ICL	05					A	TOTAL DOIT, FEE]OR	ADDIT. FEE	560
	10.11	(Column 1)		(Colum	ກ 2)	(Column 3)	· _			•		
8		REMAINING		HIGHE NUMBI	ER	PRESENT	Г		ADDI-	7		ADDI-
Đ		AFTER AMENDMENT		PREVIOL PAID FO		EXTRA		RATE	TIONAL	•	RATE	TIONAL
ğ	Total	. 33	Minus	445	3	- ,	 	X\$ 25=		1		FEE
AMENDMENT B	Independent	1. 2	Minus	2		-/-	-			OR	X\$50=	
٧	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT C	LAIM		Ŀ	X100=		16A	X200=	1 1
		, , , , , , , , , , , , , , , , , , , ,						+180=			+360=-	
										OR	TOTAL	
		(Caluma a)			•		AD	TOTAL DIT. FEE		OR ,	ADDIT. FEE	
Ţ		(Column 1) CLAIMS		(Column		(Column 3)						
2		REMAINING AFTER	ļ	NUMBE	A	PRESENT			ADDI-			ADDI-
١		AMENDMENT		PREVIOUS PAID FO		EXTRA	1	RATE	TIONAL. FEE		RATE	TIONAL
	Total	4	Minus	**	·],		人	\$ 25=	FEE	l t		_FEE_
	Independent	•	Minus	***	\vdash		ľ	₩ 23°		OR	X\$50≈	
\mathbf{I}	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT C	LAIM		X	(100=		OR	X200=	j
•	•				180-			.000				
lf i	ine entry in colum the Thichest Norm	Ľ	180=		OR L	+360=						
	the Tilghest Nur	that Provincely Pal	o for in this	ADE	TOTAL ST. FEE		OR A	TOTAL DDIT, FEE				
-17	re "Highest Numb	er Previously Paid	For (Total or	Independent	is the h	ghest number (lound i	in the appr	opriate box	in colu	mn 1.	
_	TO-676 (Res. 10A										•	E
	mint HM	~· '	-			P	atent e	nd Tradem	rk Office, U.	B. DEPN	RTMENT OF (OMMERCE